

Addiction Therapy-2014

Chicago, USA

August 4 - 6, 2014

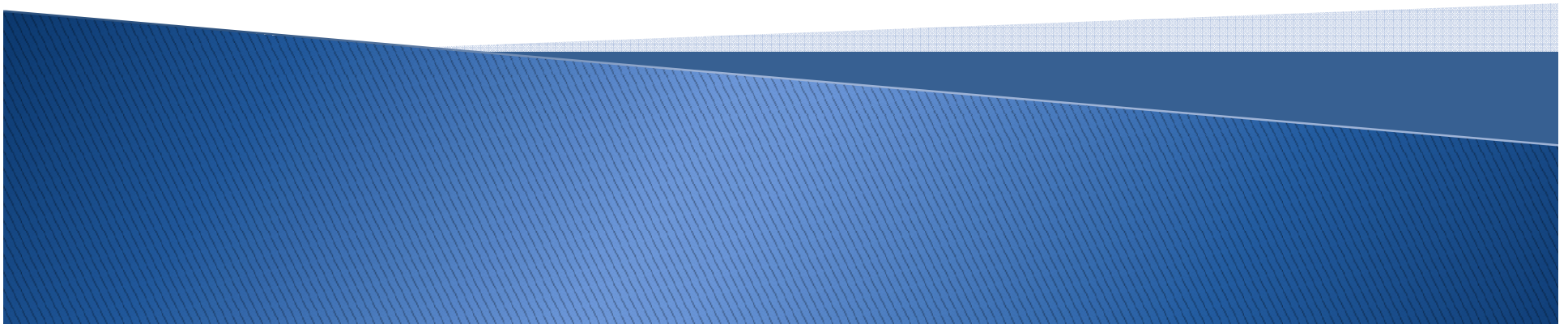


Mary Hauser



Comprehensive Analysis of Reported Drugs (CARD)[™]

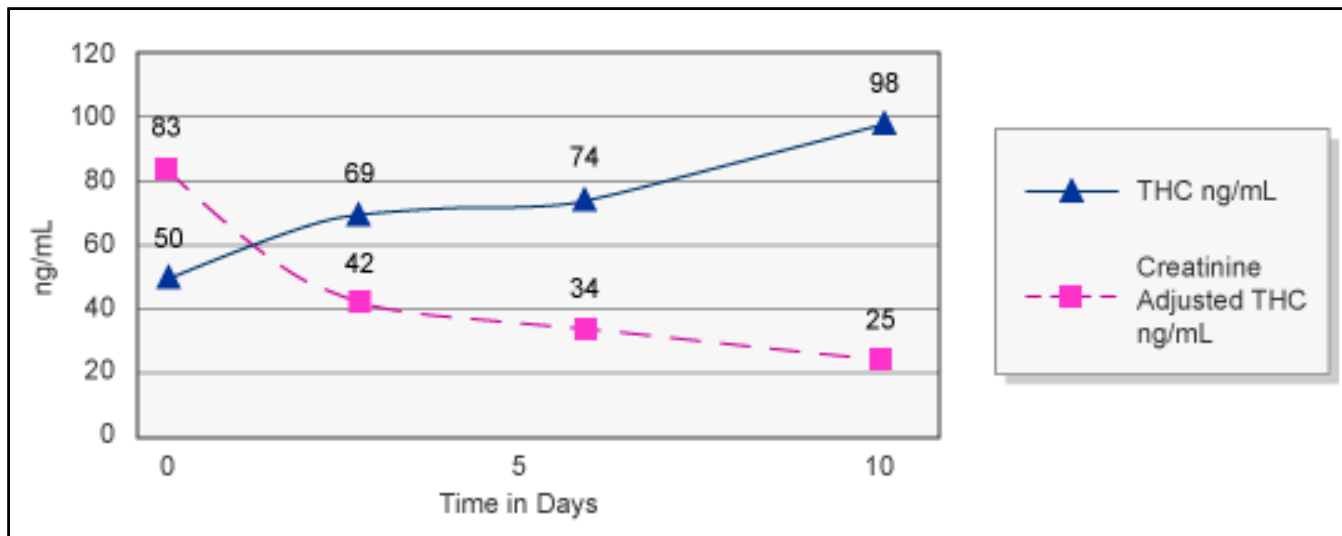
Mary P. Hauser, MA



History

- ▶ Since 1997 Dominion has provided clinics with state-of-the-art drug testing, support, education and training
- ▶ Dominion was unique in offering Creatinine-Adjusted levels allowing the clinic to monitor the elimination of a drug over time

Sample Creatinine-Adjusted THC Levels



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How CARD™ Was Born

- ▶ By 2004, Dominion began getting requests from clinics to provide summary data about their practice
- ▶ Dominion accommodated this by providing clinic-specific data summaries
- ▶ Most of the clinics that Dominion works with use drug testing results to demonstrate their clinic's effectiveness
- ▶ More and more clinics began requesting that medication compliance be added to their summary reports

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CARD™ Development

- ▶ In 2009, Dominion began the development of a summary that would capture various results
- ▶ By working with clinics the following categories of data summaries were developed:
 - An overall summary of testing results – how many patients tested positive for illicit drugs in the quarter?
 - How many were prescribed treatment-related drugs in the quarter?
 - How many were taking the drug?
 - What illicit drugs were being used?
 - Were the patients being honest about their drug use?
- ▶ **The Challenge:** Capture the information and report it back to the clinic

CARD™ Prototype

- ▶ During 2009, a combined effort from Dominion's Addiction Services Department, Information Systems Department, Clinical Services Department, and Laboratory worked together to generate a reporting structure
- ▶ In late 2009, the prototype for Comprehensive Analysis of Reported Drugs (CARD)™ was ready for BETA testing

CARD™ Launch

<div style="float: left; width: 150px;">9031638628</div> <div style="float: right; width: 150px; text-align: center;">LABORATORY TEST REQUISITION</div> <div style="clear: both;"></div>		
REPORTED DRUGS	<p>PLEASE INDICATE TREATMENT RELATED MEDICATION(S) AND/OR SELF-REPORTED DRUG MISUSE BY FILLING IN THE CORRESPONDING CIRCLES IN THE SECTION BELOW. IF NO MEDICATION USE OR DRUG MISUSE IS REPORTED, PLEASE FILL IN THE CIRCLE AT THE RIGHT.</p> <p>PLEASE COMPLETE THIS SECTION TO RECEIVE A COMPREHENSIVE ANALYSIS OF REPORTED DRUGS (CARD)™. INDICATING A PATIENT'S REPORTED DRUGS IN THIS SECTION WILL NOT GENERATE A LABORATORY TEST FOR THE SPECIFIC DRUG(S) SELECTED. LABORATORY TESTS MUST BE ORDERED IN THE "TESTS" SECTION ABOVE.</p>	☐ NO TREATMENT RELATED MEDICATIONS OR SELF-REPORTED DRUG MISUSE
<div style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center;">TREATMENT-RELATED MEDICATIONS</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> ☐ AMPHETAMINE Adderall, Dexedrine, Vyvanse ☐ BUPRENORPHINE Suboxone, Subutex ☐ CLONAZEPAM Klonopin ☐ METHADONE Methadose, Dolophine ☐ METHYLPHENIDATE Ritalin, Concerta ☐ NALTREXONE Revia, Vivitrol ☐ PHENOBARBITAL ☐ OTHER TREATMENT-RELATED MEDICATIONS (LIST BELOW) </div> <div style="width: 48%;"> ☐ ALCOHOL ☐ AMPHETAMINES AMPHETAMINE - Adderall MDMA - Ecstasy METHAMPHETAMINE ☐ BARBITURATES BUTALBITAL - Fiorinal PHENOBARBITAL ☐ BENZODIAZEPINES ALPRAZOLAM - Xanax CLONAZEPAM - Klonopin DIAZEPAM - Valium ☐ CARISOPRODOL Soma ☐ COCAINE ☐ DEXTROMETHORPHAN Coricidin-HBP, Robitussin-DM ☐ HALLUCINOGENS LSD, PCP </div> <div style="width: 48%;"> ☐ MARIJUANA ☐ METHYLPHENIDATE Ritalin, Concerta ☐ PREGABALIN Lyrica ☐ TOBACCO <u>OPIATES/OPIOIDS</u> ☐ BUPRENORPHINE Suboxone, Subutex ☐ METHADONE Methadose, Dolophine ☐ OPIATES CODEINE - Tylenol with Codeine MORPHINE HEROIN HYDROCODONE - Vicodin HYDROMORPHONE - Dilaudid </div> <div style="width: 48%;"> ☐ OXYCODONE / OXYMORPHONE Oxycontin, Percocet / Opana ☐ PROPOXYPHENE Darvon, Darvocet ☐ OTHER OPIOIDS FENTANYL - Duragesic MEPERIDINE - Demerol TAPENTADOL - Nucynta TRAMADOL - Ultram ☐ OTHER SELF-REPORTED DRUGS (LIST BELOW) </div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> ☐ UNKNOWN DRUG </div>
<div style="writing-mode: vertical-rl; transform: rotate(180deg); text-align: center;">SELF-REPORTED DRUG MISUSE</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><small>authorize the laboratory to release the results of this testing to the ordering facility.</small></p> <p>Authorization for Assignment of Payment: I authorize Dominion Diagnostics to bill my insurance provider and to directly receive payment of benefits for this laboratory test. I acknowledge that Dominion Diagnostics may be an out of network facility with my insurance. In some cases, my insurance will send the payments directly to me for the services provided by Dominion Diagnostics. I agree to endorse the insurance check and forward payment to Dominion Diagnostics within 30 days of receipt. This authorization includes the release of any medical information necessary to process this claim.</p> <p><u>Sam Doe</u> <u>Sam Doe</u> <u>11/01/09</u> Print Patient's Name Patient Signature Date</p> </div> <div style="width: 45%;"> <p><small>PLEASE SIGN AND DATE THIS SECTION AT THE TIME OF THE COLLECTION</small></p> <p><u>Michael Brown</u> <u>11/01/2009</u> Collector's Signature Date</p> </div> </div>	

DOMINION
DIAGNOSTICS

211 CIRCLE DRIVE
NORTH KINGSTOWN, RI 02882-4440
TEL: (401) 887-0800 FAX: (401) 887-0300
www.dominiondiagnostics.com

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Prescribed Treatment-Related Medications

- ▶ If the patient was **prescribed treatment related medication(s)**, the Clinic would report this on the requisition and indicate what medication was prescribed

TREATMENT-RELATED MEDICATIONS	☐ AMPHETAMINE Adderall, Dexedrine, Vyvanse
	☐ BUPRENORPHINE Suboxone, Subutex
	☐ CLONAZEPAM Klonopin
	☐ METHADONE Methadose, Dolophine
	☐ METHYLPHENIDATE Ritalin, Concerta
	☐ NALTREXONE Revia, Vivitrol
	☐ PHENOBARBITAL
	☐ OTHER TREATMENT-RELATED MEDICATIONS (LIST BELOW)

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Self-Reported Drug Misuse

- ▶ The patient was asked to fill out the **self-reported drug misuse** section and report any drug taken in the last 72 hours or since their last drug test if the test was taken within the last 72 hours

SELF-REPORTED DRUG MISUSE	☐ ALCOHOL	☐ MARIJUANA	☐ OXYCODONE / OXYMORPHONE Oxycontin, Percocet / Opana
	☐ AMPHETAMINES AMPHETAMINE - Adderall MDMA - Ecstasy METHAMPHETAMINE	☐ METHYLPHENIDATE Ritalin, Concerta	☐ PROPOXYPHENE Darvon, Darvocet
	☐ BARBITURATES BUTALBITAL - Fiorinal PHENOBARBITAL	☐ PREGABALIN Lyrica	☐ OTHER OPIOIDS FENTANYL - Duragesic MEPERIDINE - Demerol TAPENTADOL - Nucynta TRAMADOL - Ultram
	☐ BENZODIAZEPINES ALPRAZOLAM - Xanax CLONAZEPAM - Klonopin DIAZEPAM - Valium	☐ TOBACCO	☐ OTHER SELF-REPORTED DRUGS (LIST BELOW)
	☐ CARISOPRODOL Soma	<u>OPIATES/OPIOIDS</u>	
	☐ COCAINE	☐ BUPRENORPHINE Suboxone, Subutex	
	☐ DEXTROMETHORPHAN Coricidin-HBP, Robitussin-DM	☐ METHADONE Methadose, Dolophine	
	☐ HALLUCINOGENS LSD, PCP	☐ OPIATES CODEINE - Tylenol with Codeine MORPHINE HEROIN HYDROCODONE - Vicodin HYDROMORPHONE - Dilaudid	
			☐ UNKNOWN DRUG

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Laboratory Analysis Results + CARD™

DOM Laboratory Order	DOMINION DIAGNOSTICS			Questions? Please Call Clinical Services: toll free 1-800-511-8492	Fax: (401)667-0812	9
	Client: Dominion Diagnostics		Account Information:		Accession: 9110050634	
	Patient Information: DOE Sam		Account: 4010		Tests Performed: 1. Opiates Profile by EIA (P114)	



Comprehensive Analysis of Reported Drugs (CARD)™

A summary correlating self-reported drug misuse and treatment-related medications with state-of-the-art diagnostic testing

Reported Drug	Detected Analyte (Methodology)	Result ng/mL	CAV *	EXPECTED ●	NOT EXPECTED ▲	! ALERT	Comments
NON-REPORTED DRUGS							
	Benzodiazepines (EIA)	2292	1810		▲		BENZODIAZEPINES DETECTED BY EIA. SEE PHARMACIST'S NOTES [a] [b] [c]
SELF-REPORTED DRUG MISUSE							
Marijuana	THC (Cannabinoids) (EIA)	71	56	●			THC is the main psychoactive substance found in marijuana. (1,2)
Alcohol	Ethylglucuronide (LCMSMS)	4969		●			Ethylglucuronide is a metabolite of alcohol. SEE PHARMACIST'S NOTES [d]
TREATMENT-RELATED MEDICATIONS							
Buprenorphine	Buprenorphine (EIA)	73.0	57.7	●			

Comprehensive Analysis of Reported Drugs (CARD)™ utilizes the supplied list of treatment-related medications and self-reported drugs, documented pharmaceutical and pharmacokinetic data, and state-of-the-art diagnostic testing to augment individual treatment protocols. The information provided should be combined with clinical consideration and professional judgment. The list of reported drugs has not been verified by Dominion Diagnostics.

page 2 of 2

Dominion Diagnostics (DOE Sam)

Page: 1 of 2

Except where noted, the above were performed by an employee of Dominion Diagnostics, LLC and represent a true and accurate record of the analysis. This report is intended for clinical monitoring and management of patients; it is not intended for use in employment-related drug testing. Unconfirmed positive results may not meet forensic requirements.

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CARD™ References

- ▶ CARD™ would provide Pharmacist's Notes supported by scientifically validated and published references to assist the Clinic with interpretation of clinical comments and results

CLINICAL NOTES

PHARMACIST'S NOTES:

- [a] Amphetamines are a class of stimulant drugs that include amphetamine, methamphetamine, Ecstasy, and phentermine. The drug amphetamine (Adderall, Dexedrine) is prescribed for the treatment of attention-deficit hyperactivity disorder (ADHD) and is also used to treat narcolepsy. Both amphetamine and phentermine (Adipex-P, Ionamin, Fastin) are approved for use as appetite suppressants. (2,3)
- [b] Amphetamines can be detected in the urine, on average, for one to four days after the last dose. (1,3)
- [c] EIA provides only a preliminary test result. Confirmation testing (e.g. GC/MS, LC/MS/MS) must be used to rule out interference from certain prescribed and over-the-counter drugs. Please refer to Dominion's EIA Cross-Reactivity tables for a listing of cross-reacting substances. (1,4)
- [d] Ethylglucuronide (EtG) is produced in the liver after ethanol (alcohol) consumption and can be detected in the urine for up to 80 hours. Although EtG formation can occur with incidental exposures as well as consumption, by utilizing a 500 ng/mL limit of quantification (LOQ) most incidental exposures can be ruled out. (2,3)

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- ▶ The Clinic would be able to use the **CARD™ Report** as a quick reference for unexpected results

903136828		LABORATORY TEST REQUEST		SPECIMEN NO. NUMBER	
FOR LABORATORY USE ONLY		ANY CENTER 123 MAIN STREET ANYTOWN, ST 01234 Phone: 123-456-7890 FAX: 123-456-7891 ACCOUNT # 12345			
PATIENT INFORMATION		ACCOUNT # 123456789 LAST NAME D O J FIRST NAME A M		DOB MM/DD/YYYY 01/01/78	
S.S. FOR OTHER ID 0 0 0 0 0 0 0 0 2 1 4 4 GENDER (CHECK ONE) ☒ MALE ☐ FEMALE ICD-9-CM DIAGNOSIS 123.4 5 6 7 8 9		PHYSICIAN (CHECK ONE) ☒ INSURED ☐ UNINSURED ☐ SELF-PAY ☐ WORKPLACE COMPENSATION			
PHYSICIAN: STREET 123 Main Street CITY Anytown STATE USA ZIP 012345 INSURANCE NAME & ID # _____					
TESTS		1. ☒ OPATES BY BIA (P14) ☐ 4. ☐ GUAL MOS (HOS) 2. ☐ ETHANOL/COLOURIMETRIC (LUMAS) (P19) ☐ 5. ☐ 3. ☐ NORTHERN/TAPE (LUMAS) (P19) ☐ 6. ☐			
ORDERING PHYSICIAN: DR. JOHN SMITH WILLIAM COGAN SIGNATURE: _____					
REPORTED DRUGS		PLEASE INDICATE TREATMENT RELATED MEDICATIONS AND/OR SELF-REPORTED DRUG MISUSE BY FILLING IN THE CORRESPONDING CIRCLES IN THE SECTION BELOW. IF NO MEDICATION USE OR DRUG MISUSE REPORTED, PLEASE FILL IN THE CIRCLE AT THE BOTTOM.		NO TREATMENT RELATED MEDICATIONS OR SELF-REPORTED DRUG MISUSE	
PLEASE COMPLETE THIS SECTION TO RECEIVE A COMPREHENSIVE ANALYSIS OF REPORTED DRUGS (CARGO™) INCLUDING A PATENT'S REPORTED DRUGS IN THIS SECTION WILL BE GENERALLY LABORATORY TEST FOR THE SPECIFIC DRUGS SELECTED. LABORATORY TESTS WILL BE ORDERED IN THE "TESTY" SECTION BELOW.					
TREATMENT RELATED MEDICATIONS 1. ☐ AMPHETAMINE 2. ☐ BUPROPION 3. ☐ CLONAZEPAM 4. ☐ METHADONE 5. ☐ METHYLPHENIDATE 6. ☐ NALTRAXONE 7. ☐ PHENOBARBITAL 8. ☐ OTHER TREATMENT RELATED MEDICATIONS (LIST BELOW)		SELF-REPORTED DRUG MISUSE 1. ☐ ALCOHOL 2. ☐ AMPHETAMINE 3. ☐ ANABOLIC STEROIDS 4. ☐ BARBITURATES 5. ☐ BENZODIAZEPINES 6. ☐ BUPROPION 7. ☐ CANNABIS 8. ☐ COCAINE 9. ☐ DEXTROMETHORPHAN 10. ☐ HALLUCINOGENS		1. ☐ BARBITURATES 2. ☐ BUPROPION 3. ☐ CANNABIS 4. ☐ COCAINE 5. ☐ DEXTROMETHORPHAN 6. ☐ HALLUCINOGENS 7. ☐ KETAMINE 8. ☐ LORAZEPAM 9. ☐ MARIJUANA 10. ☐ METHADONE 11. ☐ METHYLPHENIDATE 12. ☐ NALTRAXONE 13. ☐ PHENOBARBITAL 14. ☐ PHENYLETHYLAMINE 15. ☐ TOBACCO 16. ☐ OTHER TREATMENT RELATED MEDICATIONS (LIST BELOW) 17. ☐ BUPROPION 18. ☐ CANNABIS 19. ☐ COCAINE 20. ☐ DEXTROMETHORPHAN 21. ☐ HALLUCINOGENS 22. ☐ KETAMINE 23. ☐ LORAZEPAM 24. ☐ MARIJUANA 25. ☐ METHADONE 26. ☐ METHYLPHENIDATE 27. ☐ NALTRAXONE 28. ☐ PHENOBARBITAL 29. ☐ PHENYLETHYLAMINE 30. ☐ TOBACCO	
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1. ☐ OXYCODONE 2. ☐ OXYMORPHONE 3. ☐ PROPOXYPHENE 4. ☐ OTHER OPIOIDS 5. ☐ OTHER DRUGS 					

DOMINION DIAGNOSTICS		Questions? Please call Clinical Services: toll-free 1-800-511-6822		201 Grand Central Ave., Suite 400 New York, NY 10017 Fax: 408-682-8422			
Laboratory Order	Patient: Corbin Dickinson Birth Date: 11/27/1957 Gender: M ID: 020020002144 Collected: 11/01/09 Received: 11/02/09-09:31		Account Information: Account: 4010 Location: North Kingstown Clinical: Collector: Requisition: 004973 Fax: (401) 667-0818		Tests performed: 1 Opiates Profile by EIA (P14) 2 Ethylglucuronide Profile by LC/MS/MS (P178)		
					Accession: 9110049733		
Laboratory Analysis:	(I) Analyte (Methodology)	Flag	Result	Creatinine Adjusted Value	LOQ/Normal Range	Units	Clinica Note
Drug Tests	Amphetamines						
	✓ AMPHETAMINES (EIA)	DETECTED	3069	2550	1000	ng/mL	
	Benzodiazepines						
	Benzodiazepines (EIA)	Not detected			300	ng/mL	
	Cannabimimids						
	✓ THC (CANNABINOIDS) (EIA)	DETECTED	79	65	25	ng/mL	
	Cocaine						
	Cocaine (EIA)	Not detected			150	ng/mL	
	Ethanol						
	✓ ETHYLGLUCURONIDE (LC/MS/MS)	DETECTED	4975		500	ng/mL	
	Opioids						
	Buprenorphine (EIA)	Not detected			15	ng/mL	
	Heroin Metabolite (EIA)	Not detected			10	ng/mL	
	Methadone Metabolite (EIA)	Not detected			100	ng/mL	
	Methadone (EIA)	Not detected			250	ng/mL	
Opates (EIA)	Not detected			300	ng/mL		
Oxycodone/Oxymorphone (EIA)	Not detected			100	ng/mL		
Propriophene (EIA)	Not detected			150	ng/mL		
Biological Markers	Creatinine		121.5		20.6-420.0	mg/dL	
	pH		7.4		4.5-8.0		
	Specific Gravity		1.018		1.003-1.035		
	Urobilin				200	u/gmL	
Comments: <ul style="list-style-type: none"> Results unconfirmed unless otherwise indicated. Creatinine adjusted values are for clinical pharmacokinetic comparison only ✓ ALL TESTING AUTO VALIDATION 							
Notations: <ul style="list-style-type: none"> ✓ Assay detected (I) Ion 		Abbreviations: <ul style="list-style-type: none"> EIA: Enzyme Immunoassay EIA: Enzyme Immunoassay UPLC: High Performance Liquid Chromatography MS: Mass Spectrometry LC/MS/MS: Liquid Chromatography/Mass Spectrometry LC/MS/MS: Liquid Chromatography/Mass Spectrometry LOQ: Limit of Quantitation 					

DOMINION DIAGNOSTICS <small>Canadian Clinical Diagnostics</small> <small>Part Information:</small>		<small>Questions/Pleas Call Clinical Services toll free 1-855-511-8462</small> <small>Fax: (416) 897-0812</small>		<small>#</small>				
DOE Sam <small>Building 107/1567</small> <small>Germer M</small> <small>000000002344</small> <small>Collected: 1124049</small> <small>Received: 1125059-12-27</small>	<small>Account Information:</small> <small>Account: 4010</small> <small>Location: North Kingstown</small> <small>Clinician:</small> <small>Collector:</small> <small>Registration: 0005034</small> <small>Fax: (416) 897-0818</small>	<small>Tests Performed:</small> <small>1 Opiates Profile by EIA (P14)</small> <small>1 Benzodiazepines Profile by GC/MS (P178)</small>	<small>Accession:</small> 110050564					
SAMPLE REPORT								
<small>Self-reported drug misuse: Marijuana, Alcohol</small> <small>Treatment-related medications reported: Buprenorphine</small>								
<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> </div> <div> <h3 style="margin: 0;">Comprehensive Analysis of Reported Drugs (CARD)™</h3> <p style="font-size: small; margin: 0;">A summary containing self-reported drug misuse and treatment-related medications with related drug diagnostic results</p> </div> </div>								
Reported Drug	Detected Analyte (Methodology)	Result	CAV+ <div style="display: flex; align-items: center; justify-content: center; gap: 5px;"> <div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div> <div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div> <div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div> </div>	<div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div>	<div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div>	<div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div>	<div style="display: flex; flex-direction: column; align-items: center; gap: 5px;"> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> <div style="width: 10px; height: 10px; background-color: black; border: 1px solid black;"></div> </div>	<small>Comments</small>
NON-REPORTED DRUGS								
Benzodiazepines (EIA)	2292	1810	▲	BENZODIAZEPINES DETECTED BY EIA-SEE PHARMACIST'S NOTES (a) [b] (c)				
SELF-REPORTED DRUG MISUSE								
Marijuana	THC (Cannabinoids) (EIA)	71	56	●	THC is the main psychoactive substance found in marijuana. 1,2,3			
Alcohol	Ethylglucuronide (LC/MS/MS)	4969	●	●	Ethylglucuronide is a metabolite of alcohol-SEE PHARMACIST'S NOTES (a)			
TREATMENT-RELATED MEDICATIONS								
Buprenorphine	Buprenorphine (EIA)	73.5	27.7	●				
EIA (Enzyme Immunoassay) provides only a preliminary analytical test result. A more specific alternative method (i.e. GC/MS, LC/MS/MS) must be used to obtain a confirmed analytical result. Clinical confirmation and professional judgment should be applied to any test result particularly when preliminary results are used.								
CA (Gas/Liquid Chromatography Mass Spectrometry) (CAV) are used to monitor changes in drug concentrations in the urine over time and are for clinical pharmacokinetic comparison only.								
CLINICAL NOTES: PHARMACIST'S NOTES:								
[a] Benzodiazepines are a class of depressant drugs that include alprazolam (Xanax), clonazepam (Klonopin), diazepam (Valium), lorazepam (Ativan), oxazepam (Serax), and temazepam (Restoril). These drugs are prescribed to manage a variety of conditions including anxiety, insomnia, seizures, muscle spasms, alcohol withdrawal and pre-operative sedation. (2,3)								
[b] Benzodiazepines can be detected in the urine, on average, 2 to 7 days after the last dose. Exceptions are the metabolites of diazepam and clobazepam, which can be detected up to 30 days. (2,4)								
[c] EIA provides only a preliminary test result. Confirmation testing (i.e. GC/MS, LC/MS/MS) must be used to rule out interference from certain prescribed and over-the-counter drugs. Please refer to Dominion's EIA Cross-Reactivity tables for a listing of cross-reacting substances. (1)								
[d] Ethylglucuronide (EtG) is produced in the liver after alcohol (ethanol) consumption and can be detected in the urine for up to 80 hours. Although EtG formation can occur with medicinal beverages as well as consumption, by utilizing a 500 ng/ml limit of quantification (LOQ) most incidental exposures can be ruled out. (5)								
1. Monoclonal Cross Reactivity, CA 96398 2. Basell, Inc. Description of Drug Analysis and Chemicals in Man: © 1993, Biometrical Publications, Fort City, 2004 3. Lavi EF, Armstrong LJ, Goffman MP, Laine L. Drug Recognition Handbook with International Trade Names Index, 1997, ed. Addison-Wesley, Inc. 2007. 4. Guide to Alcohol Drugs. Abbott Diagnostics #9 445818-10 Feb. 2003. 5. World Eye Stoppel Dec. Interview re: Ethylglucuronide the direct ethanol metabolite on the threshold to routine use. Long-Cong 2003 Dec 98 Report 2-21-61								
Comprehensive Analysis of Reported Drugs (CARD)™ is utilized for the purpose of treatment-related medications and self-reported drugs, documented pharmacokinetic and pharmacogenetic data, and base-line drug diagnostic testing is assigned initial treatment programs. The information provided should be combined with clinical consultation and professional judgment. The list of reported drugs has not been verified by Dominion Diagnostics.								

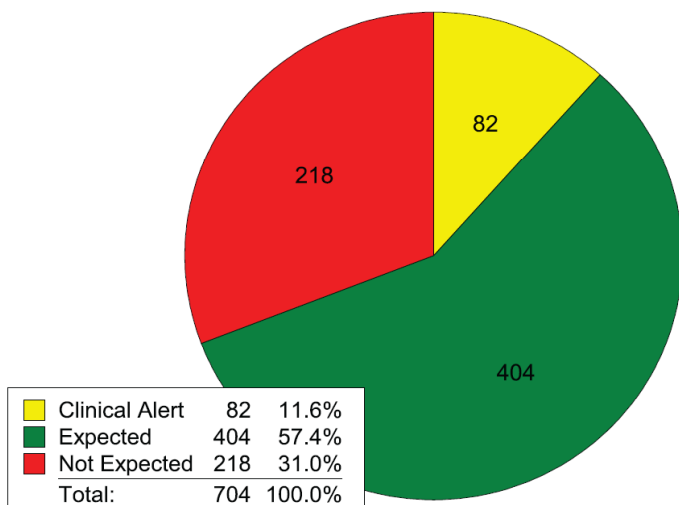
CARD™ Summary Reports

- ▶ The Clinic would also receive a summary quarterly and annually that would show the following:
 - Overall Summary of the Clinic
 - Summary of NO treatment related medication prescribed and NO self reported use
 - Adherence to Treatment Related Medication
 - Self-Reported Misuse for Both Detected and Non-Detected
 - Self-Reported Drug Misuse When Adherent to Medication both detected and non-detected
 - A Summary as to why a CARD™ Analysis could not be completed

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Overall CARD Summary



Overall Total Specimens: 1,224

Total Patients: 340

Overall CARD Summary - Specimens: 704

Patients: 220

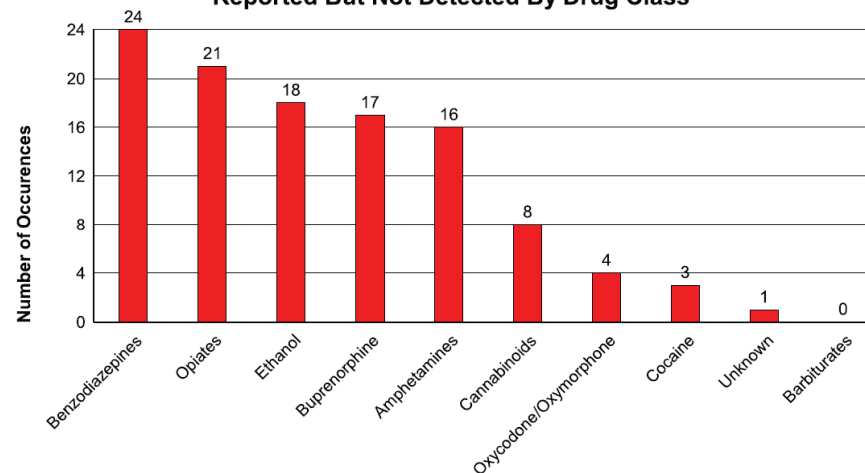
When calculating CARD summary results as either "Expected", "Not Expected", or "Clinical Alert", the following conditions were applied:

"Expected": The total number of specimens in which ONLY Expected messages were generated

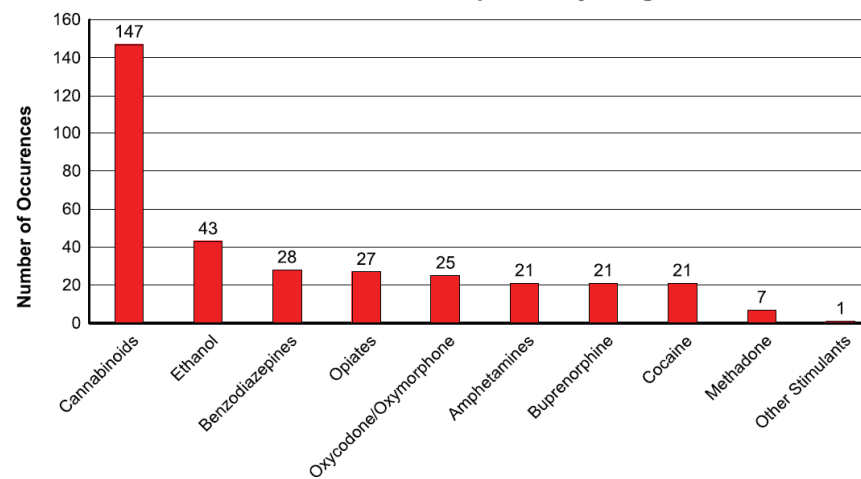
"Not Expected": The total number of specimens in which at least one "Not Expected" message was generated

"Clinical Alert": The total number of specimens in which at least one "Clinical Alert" message but no "Not Expected" messages were generated

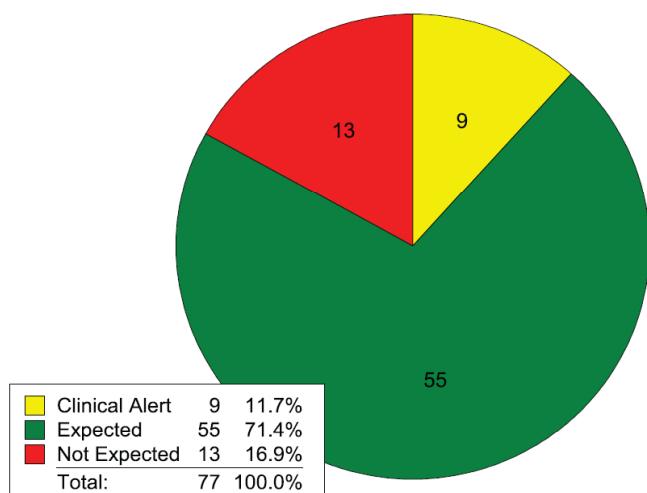
Reported But Not Detected By Drug Class



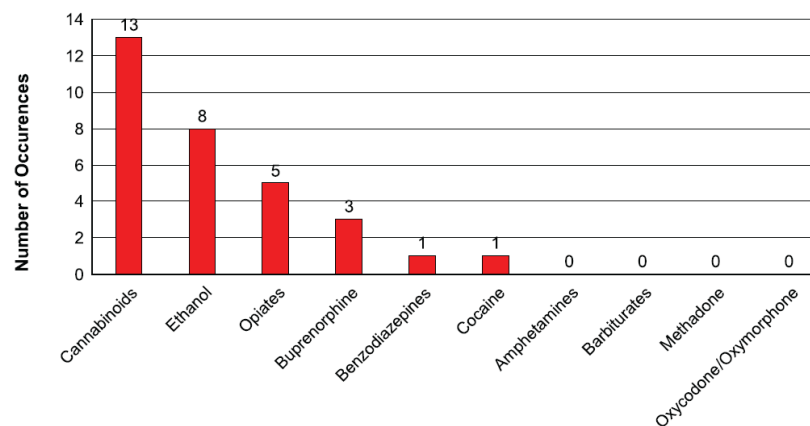
Detected But Not Reported By Drug Class



Summary Analysis



Detected But Not Reported By Drug Class



Summary Analysis - Total Specimens: 77

Total Patients: 59

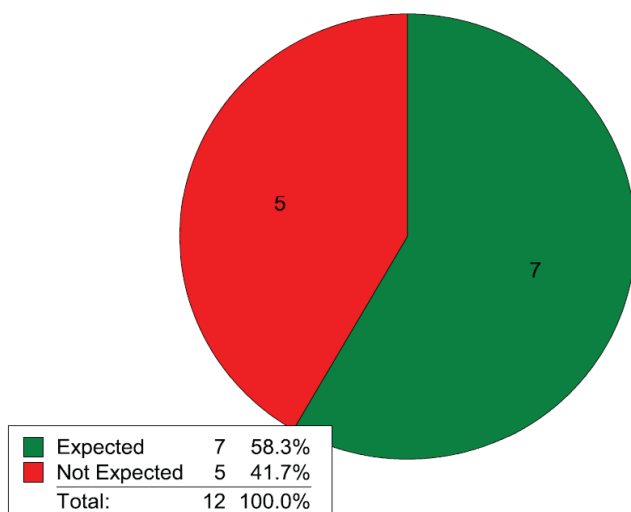
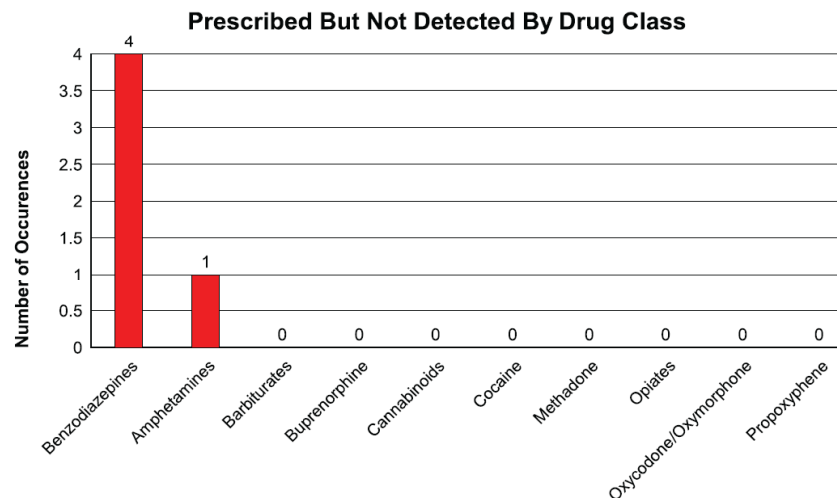
When calculating CARD summary results as either "Expected", "Not Expected", or "Clinical Alert", the following conditions were applied:

"Expected": The total number of specimens in which ONLY Expected messages were generated

"Not Expected": The total number of specimens in which at least one "Not Expected" message was generated

"Clinical Alert": The total number of specimens in which at least one "Clinical Alert" message but no "Not Expected" messages were generated

Summary Analysis



Summary Analysis - Total Specimens: 12

Total Patients: 9

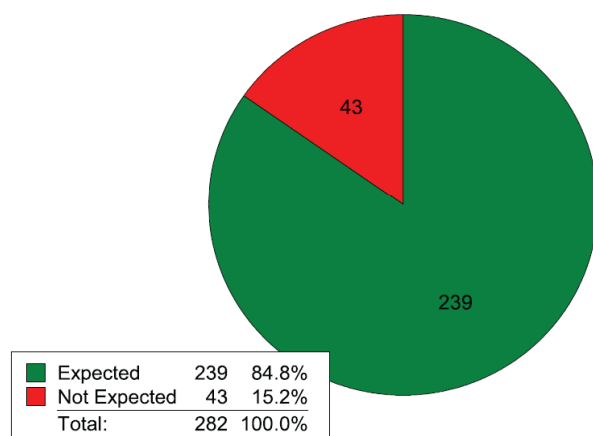
When calculating CARD summary results as either "Expected", "Not Expected", or "Clinical Alert", the following conditions were applied:

"Expected": The total number of specimens in which ONLY Expected messages were generated

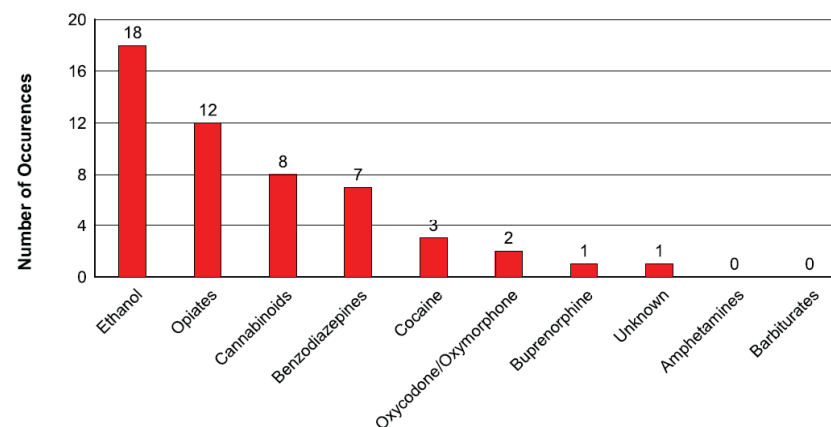
"Not Expected": The total number of specimens in which at least one "Not Expected" message was generated

"Clinical Alert": The total number of specimens in which at least one "Clinical Alert" message but no "Not Expected" messages were generated

Summary Analysis



Self-Reported But Not Detected By Drug Class



Summary Analysis - Total Specimens: 282

Total Patients: 140

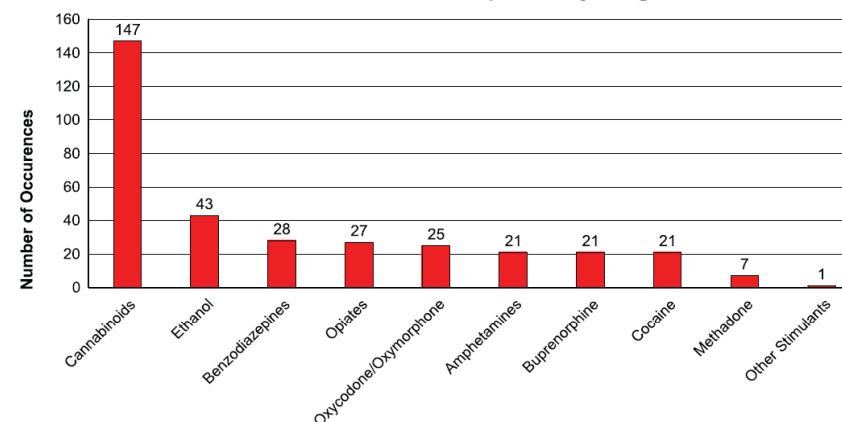
When calculating CARD summary results as either "Expected", "Not Expected", or "Clinical Alert", the following conditions were applied:

"Expected": The total number of specimens in which ONLY Expected messages were generated

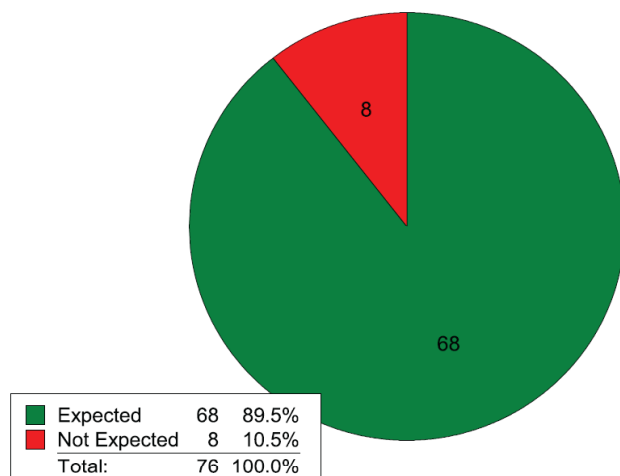
"Not Expected": The total number of specimens in which at least one "Not Expected" message was generated

"Clinical Alert": The total number of specimens in which at least one "Clinical Alert" message but no "Not Expected" messages were generated

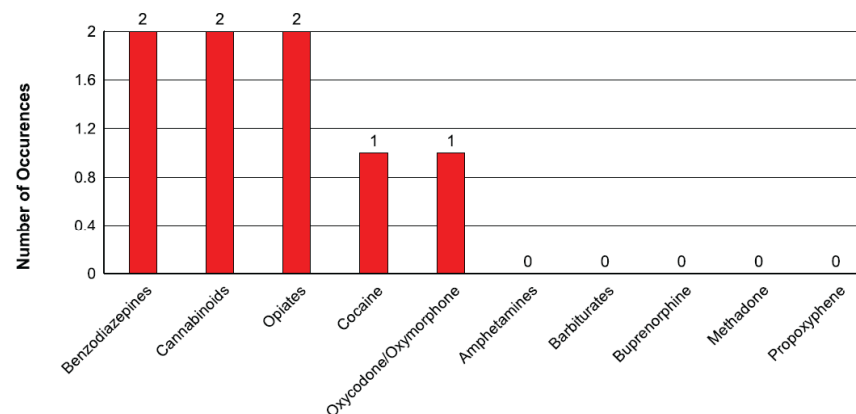
Detected But Not Self-Reported By Drug Class



Summary Analysis



Self-Reported But Not Detected By Drug Class



Summary Analysis - Total Specimens: 76

Total Patients: 28

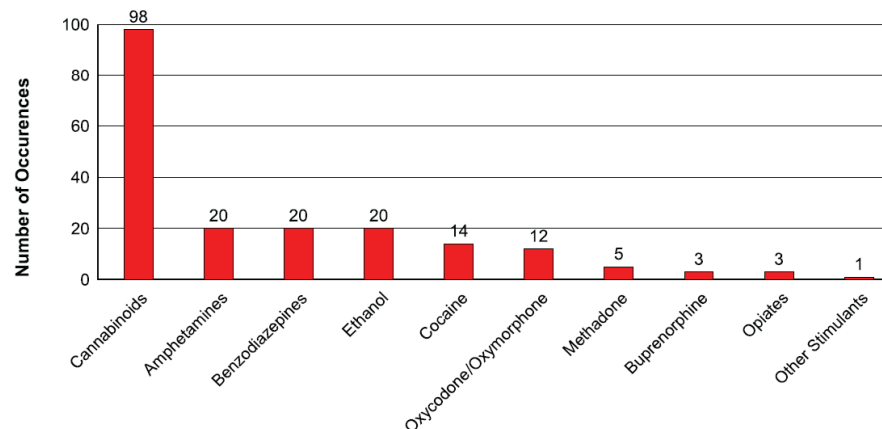
When calculating CARD summary results as either "Expected", "Not Expected", or "Clinical Alert", the following conditions were applied:

"Expected": The total number of specimens in which ONLY Expected messages were generated

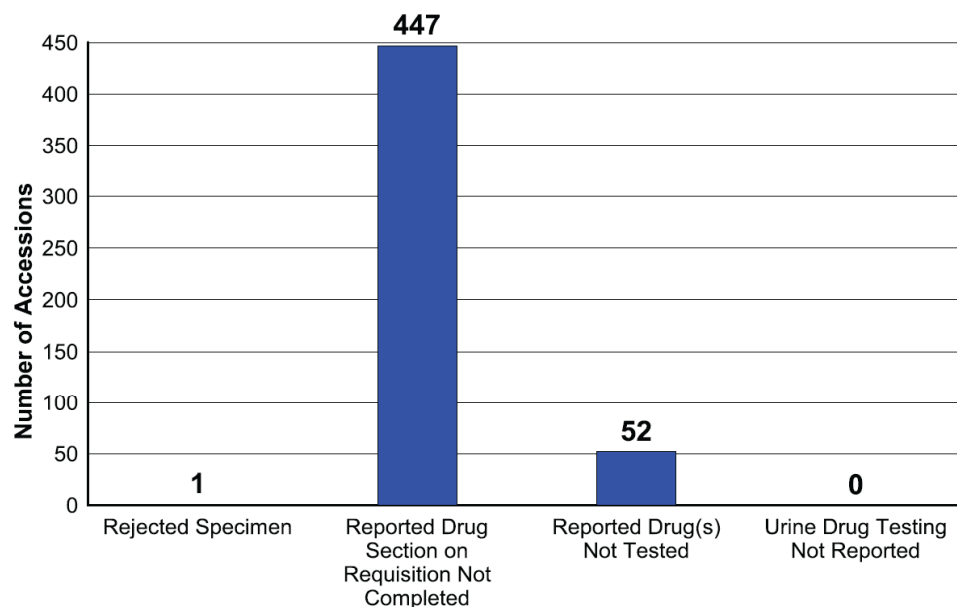
"Not Expected": The total number of specimens in which at least one "Not Expected" message was generated

"Clinical Alert": The total number of specimens in which at least one "Clinical Alert" message but no "Not Expected" messages were generated

Detected But Not Self-Reported By Drug Class



Summary Analysis



Legend Key

Rejected Specimen - quantity not sufficient (QNS) to perform testing (e.g. specimen leaked in transit)

Reported Drug Section on Requisition Not Completed - information regarding treatment-related medications and self-reported drug misuse was not supplied for CARD analysis ("Reported Drugs" section left completely blank).

Reported Drug(s) Not Tested - testing available by special request only (ex: Abilify, trazodone)

Urine Drug Testing Not Reported - biological markers not consistent with urine or an adulterated sample and unable to result

Please note - the specimen counts for the categories presented on this page are not mutually exclusive. It is possible for a specimen to be counted in more than one category. For example, a specimen may leak in transit. This would result in that specimen being counted as a "Rejected Specimen". This same specimen may also have had treatment-related and/or self-reported drugs indicated on the accompanying requisition. In that case, the specimen would also be counted in the "Reported Drug(s) Not Tested" category.

Data Sorted by Levels of Care

- ▶ Clinics requested that Data be sorted by level of care
- ▶ Dominion sorts the data by Medical Detox, Amb Detox, Opiate Tx, IP, PHP, IOP, OP, RES thus dividing the data by level of care

CARD™ Data Review

- ▶ Dominion's Addiction Services Advisory Board began review of the data summaries in 2011
- ▶ In 2012, Dr. Ken Blum began a statistical analysis of the data
- ▶ Measurement of patient compliance to treatment-related medications was of particular interest to the field



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